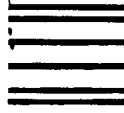


Name _____
Address _____
City _____
State _____ Zip Code _____
Home Phone (____) _____
Work Phone (____) _____



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Jorge M. Gonzalez
City Manager
City of Miami Beach
1700 Convention Center Drive
Miami Beach, FL 33139





Customer Service Evaluation

"We put our customers first."

"On behalf of the City of Miami Beach, thank you for your comments. They will help us serve you better in the future."

**Jorge M. Gonzalez
City Manager**

What was the purpose of your visit? _____

Which department did you visit? _____

	Excellent	Good	Fair	Poor
How would you rate the ease of locating the department you visited?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How would you rate the service you received?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How would you rate the City representative's knowledge of the information?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How would you rate the City representative's attitude and manner?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was your specific need addressed to your satisfaction?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		

If no, why not? _____

Comments/suggestions for improvements _____

If you wish to be contacted regarding your responses to this survey, please complete the section below.

Name _____

Address _____

City _____ State _____ Zip Code _____

E-mail _____

Telephone Number _____

Best Time To Call _____ AM _____ PM

Thank you again!
www.miamibeachfl.gov